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—

FOR PATENT APPLICATION

My residence, post office address and citizenship are as stated below next to my name,

PREVENTION AND TREATMENT OF HYPERGASTRINEMIA, the specification of which

X was filed on 11/14/2000 as Application No. 09/700,329 and was amended on 11/14/2000. (if applicable)

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Prior Foreign Application(s)			Priority Not Claimed	Certified Copy Attached?	
(Number)	(Country)	(MM/DD/YYYY)		Yes	No

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

60/085,714  
(Application Number)

05/15/1998  
(Filing Date, MM/DD/YYYY)

I hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: STANLEY B. KITA, Registration No. 24,561; GEORGE A. SMITH, JR., Registration No. 24,442; WILSON OBERDORFER, Registration No. 17,379; MARY E. BAK, Registration No. 31,215, CATHY A. KODROFF, Registration Number 33,980, HENRY HANSEN, Registration No. 19,612, and WILLIAM BAK, Registration Number 37,277.

Address all telephone calls to Mary E. Bak at telephone no. (215) 540-9206. Address all correspondence to HOWSON AND HOWSON, Spring House Corporate Center, P. O. Box 457, Spring House, Pennsylvania 19477.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: Philip C. Gevas

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence: Key Biscayne, Florida 33149

Citizenship: United States of America

Post Office Address: 881 Ocean Drive #23D, Key Biscayne, Florida 33149

Full name of second inventor: Stephen Grimes

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence: Davis, California 95616

Citizenship: United States of America

Post Office Address: 551 Rutgers Drive, Davis, California 95616

Full name of third inventor: Stephen Karr

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence: Davis, California 95616

Citizenship: United States of America

Post Office Address: 2265 Halsey Circle, Davis, California 95616

Full name of fourth inventor: Dov Michaeli

Inventor's signature \_\_\_\_\_

\_\_\_\_\_ Date

Residence: Larkspur, California 94939

Citizenship: United States of America

Post Office Address: 21 Marina Vista Avenue, Larkspur, California 94939

Full name of fifth inventor: Susan Watson

Inventor's signature S. A. Watson

18th Dec 2000  
Date

Residence: Edwalton, Nottingham NG2 6RB Great Britain

Citizenship: United Kingdom

Post Office Address: 5 Seatolla Close, Edwalton, Nottingham NG2 6RB Great Britain

**DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

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Residence: Davis, California 95616

Citizenship: United States of America

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Full name of third inventor: Stephen Karr

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence: Davis, California 95616

Citizenship: United States of America

Post Office Address: 2265 Halsey Circle, Davis, California 95616

Full name of fourth inventor: Dov Michaeli

Inventor's signature *Dov Michaeli* 11/8/01  
Date

Residence: Larkspur, California 94939

Citizenship: United States of America

Post Office Address: 21 Marina Vista Avenue, Larkspur, California 94939

Full name of fifth inventor: Susan Watson

Inventor's signature \_\_\_\_\_  
Date

Residence: Edwalton, Nottingham NG2 6RB Great Britain

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Inventor's signature Stephen Karr 25 January 2001  
Date

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13 Dec, 2000  
Date

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Inventor's signature  12-16-00  
Date

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Full name of fourth inventor: Dov Michaeli

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